

Consultant psychiatrist speaks on UK's joint junior-senior doctors strike

Our reporters

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Tens of thousands of junior doctors and consultants took strike action in Britain this week. Both groups are represented by the British Medical Association (BMA), who walked alongside junior doctors in the Hospital Consultants and Specialists Association.

The consultants, senior doctors, walked out on Tuesday and Wednesday and the junior doctors for three days Wednesday to Saturday morning—the latter's sixth round of strikes. This made Wednesday the first day of joint action by junior and senior doctors in the history of the National Health Service (NHS).

More joint action is planned for October, with both groups of workers striking October 2-5, coinciding with the ruling Conservative Party's annual conference.

World Socialist Web Site reporters spoke with a consultant psychiatrist at South London and Maudsley Trust, who wished to remain anonymous. He explained the strike was formally about pay—the BMA is seeking a 12 percent rise for 2023-24 (just above inflation the year before) for consultants, and 35 percent for junior doctors—but that the issues being protested went far wider.

“The strike is ultimately about pay restoration. But because of the nature of how [the healthcare] system is organised at the moment, pay restoration becomes the only medium through which we can talk about how healthcare is being managed and how the NHS is being inadequately supported by the government.

“Doctors want a quality of experience at work that allows them to do their jobs, to do everything they've been trained to do for years. But I think it's very difficult for us to pull any levers without talking about pay restoration. In one sense it's about maintaining a certain sense of stability of income as much it is about ensuring what we have a way to express our concerns out the line of travel for the National Health Service at the moment.”

He added, “I think it's quite misguided and ignorant to think that people are going to continue doing work that's this challenging if they're not feeling supported. It's a massive problem: the workforce will start bleeding out and

people will go to different places, people will move to different industries... There are really good questions to be asked here: if the health service isn't a priority, what is?”

Government spending on healthcare fell a cumulative £400 billion behind the average of 14 comparable European countries in the decade to 2019—£730 billion behind Germany. Nurses and doctors have seen their real terms wages fall by 7-8 percent on average, declining as much as 20-30 percent for some—there are over 43,000 nursing vacancies and roughly 10,000 doctors vacancies. The UK has been left with some of the lowest rates of hospital beds, nurses, and doctors per person among similar economies.

With waiting lists continuing to break records, private companies, already with their claws in the NHS, are circling. In the past two years, private equity companies have struck 150 deals for healthcare operations in the UK.

The doctor explained the stakes to our reporters, “The NHS is probably one of the greatest constructions of human effort that we've seen, and to see it slowly deteriorate is a really sobering moment. I think it's worth standing up for it.”

Asked about the reasons for this crisis, the doctor explained, “It's a deliberate choice. I have absolutely no time for any consideration that says this isn't a political problem. Health is politics. Health is shaped by political choices, whether that's decisions made around social care, decisions made around pay. Health is a construct that comes about from a combination of employment, housing, community—these are all areas which are shaped by politics. It's completely ridiculous to say that this isn't a political discussion.”

Attacks on NHS workers by politicians and the media have been unrelenting. Writing at the start of this week's, the *Times*'s Daniel Finkelstein intoned, “Doctors' irresponsible strike cannot succeed”. The *Telegraph* published, “Doctors' greedy pay demands risk their reputation”, plus a comment by Health Secretary Steven Barclay titled “Time for BMA to end strikes and put patients first,” blaming health workers for the crisis created by his government and party.

In a grave threat to healthcare workers, Barclay announced plans to expand “minimum service levels [draconian anti-strike laws] to hospital-based health services, like doctors and nurses.”

The Labour Party has joined the Tories in its attacks, with Shadow Health Secretary Wes Streeting telling the *Telegraph*, “We are not going to have a something-for-nothing culture in the NHS with Labour... I’m not prepared to pour money into a black hole.” Commenting disparagingly that the NHS is “not a shrine”, he threatened it would have to “reform or die” and described health workers as “vested interests” who would not be allowed to “stand in the way of reforms.”

The psychiatrist explained, “A lot of it is about controlling and dictating and influencing the narrative ... These ideas that [the strikes] are just about people wanting more money stink of a dishonest understanding of the situation. It has nothing to do with greed or self-promotion—people just want to do good work, they just want to be given the resources to do their jobs well.”

“It’s very narrow-minded and short-sighted: if you don’t have a health service that can provide that safety net, things will become increasingly challenging in ways that we can’t foresee.”

He added, “We should also be talking about how effective [the NHS] has been: per capita, it’s been one of the most effective ways to provide health at a high standard that we know about.

Referring to the impact of privatisation and austerity and attempts now to pin the blame on “inefficiencies” he argued, “I’m very suspicious of narratives that just seek to point out its problems. That doesn’t bear out in the actual records, in how it was performing 20 years ago before a lot of the changes came about.”

Speaking about the joint action between junior and senior doctors, the doctor said it was “definitely a positive move,” adding, “I think it’s unfortunate that the nursing union didn’t get enough votes [for renewed strike action].”

“Nurses have a hugely challenging role, and with the loss of the bursaries [in 2017], there’s so much pressure on nursing staff. My colleagues [nurses] found it very difficult to take action with the level of income they’re making. Nurses are often at the very forefront of taking care of patients and making clinical decisions, and I don’t think they’re proportionally remunerated to any extent ... It’s a very different prospect [to take strike action and lose pay] when you’re in a different income bracket.”

Nurses voted in April to reject the below-inflation deal agreed between the Royal College of Nursing (RCN) and the Tory government, despite immense pressure from the RCN bureaucracy. But the union’s clear signal that it would fight

for nothing more, following months of scattered and limited strikes, convinced enough workers that there was no way forward under the leadership of the RCN. A ballot to renew the mandate for strike action—carried out on an aggregated national basis—failed to pass, allowing the government and the union to impose the sellout deal.

The ending of the nurses’ action, which had won heavy popular support, was one of the major blows to a strike wave involving millions ongoing since summer 2022. The sellouts by the health unions and those in other sectors have resulted in doctors being left to fight on their own in the NHS, and increasingly in the country as a whole.

The doctor at Maudsley spoke in favour of more joint action, referencing several recent or ongoing disputes. “Ideally, I’d like to be seeing more actions taken across professions. I’m very much interested in general actions. Whether it’s with the railway workers, the postal workers, these are problems that are being felt because of the cost-of-living crisis across the board. I don’t see these problems as being relegated to single domains, as if our interests were somehow independent of other professions.”

This is the universal sentiment throughout the working class in the public and private sectors. But it has been countered at every turn by the trade union bureaucracy, allowing the government to move forward with its agenda. The sabotage of the union bureaucracy can only be overcome through the organisation of rank-and-file committees to draw up demands and coordinate renewed strikes.

Doctors, still engaged in determined industrial action, can play a leading role by appealing to their colleagues in the NHS to join them, and to the wider working class to come out in support of the fight for high-quality, fully funded public services.



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